Motivators for high acceptability of HIV Self-testing Among Technical Vocational Education and Training College Students in Gauteng and North West Province

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Background

- HIV self-testing (HIVST) is globally accepted as an important complement to existing HCT approaches, and several countries including South Africa have already introduced or are considering the introduction of HIVST as part of their testing strategies.
- HIVST has the potential to facilitate more people getting tested because it has advantages of convenience, speed, privacy, anonymity, confidentiality, and accessibility.
- HIVST can also help eradicate most of the barriers that stand in the way of youth and the general population getting tested

Aim

- The study investigated the acceptability of HIVST among students in Technical Vocational Education and Training (TVET) colleges in Gauteng and North West provinces in South Africa.

Methods and materials

- A formative evaluation design using the mixed approach was employed to assess the opinions of and acceptability of HIVST among TVET college students.
- Overall 16 colleges were invited to participate in the study, 13 colleges in Tshwane districts and 3 in Bojanala district.
- A cross-sectional survey using a self-administered structured questionnaire was used to collect data among 3,662 students recruited from 13 TVET colleges.
- The study was conducted after obtaining ethical approval from the Research and Ethics Committee of the University of Limpopo, Medunsa Campus (MREC/H/46/2014: IR). Permission was obtained from the Department of Higher Education and Training, and the Head of
- Departments of District Higher Education and Training as well as the principals of the TVET colleges.

Methods and materials

- Within each college, cluster sampling consisting of levels of study of the National Certificate Course (N1 to N6) was used to produce a representative sample of students.
- The research team obtained permission to randomly approach subject facilitators and administer the questionnaire.
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Results:

Demographics and sexual behavior

Variables	Frequency (N)	Percentage
Gender (missing values = 57)		
Female	2,040	56.6%
Male	1,565	43.4%
Age group (missing values = 54)		
Younger ≤ 24 years	3,127	86.7%
Older >24years	481	13.3%
Age category (missing values = 54)		
< 20	586	16.3%
20-24	2,541	70.4%
25-29	408	11.3%
≥ 30	73	2.0%
Have a current sexual partner (missing values = 121)		
Yes	2,894	81.7%
No	647	18.3%
Sexually active (missing values = 60)		
Yes	2,916	80.9%
No	686	19.1%

Variables	Frequency (N)	Percentage
Number of sexual partners in the past year (no missing values)		
One partner	2,106	66.2%
Two partners	618	19.4%
More than two partners	458	14.4%
Condom use during the last sexual act (no missing values)		
Yes	1,801	66.5%
No	906	33.5%
Ever tested for HIV (missing values = 24)		
Yes	2, 698	72.2%
No	940	27.8%
Know HIV status of sexual partner (no missing values)		
Yes	2,130	60.2%
No	1,130	32.0%
Not sure	275	7.8%

Factors associated with HIVST

- The outcome measure was the acceptability of HIV self-testing.
- Factors significant at the $p < 0.05$ level in bivariate analysis were the following: being tested for HIV in the past year, being sexually active, number of sexual partners, ever tested for HIV, willing to buy HIVST kit, submit test results at the local health facility for HCT statistics, confirm test results at the local health facility and uptake HIVST with a sexual partner.

Factors associated with HIVST

Variables	Missing values	Male	Female	Total	*P* value
Willing to use HIVST if it was available					
Yes	88	1,203 (77.5%)	1,737 (85.9%)	2,947	0.000*
No		197 (12.7%)	173 (8.6%)	374	
Not sure		153 (9.8%)	111 (5.5%)	267	
Willing to buy the self-testing kit					
Yes	105	1,077 (69.8%)	1,584 (78.7%)	2,666	0.000*
No		258 (16.7%)	242 (12.0%)	504	
Not sure		208 (13.5%)	188 (9.3%)	399	
Test with partner using HIVST kits					
Yes	131	983 (63.9%)	1,594 (80.0%)	2,986	0.000*
No		320 (20.8%)	269 (13.5%)	301	
Not sure		235 (15.3%)	130 (6.5%)	268	
Willing to submit HIVST results for health statistics					
Yes	116	888 (73.3%)	1,211 (77.4%)	2,104	0.030*
No		220 (57.6%)	228 (60.2%)	451	
Not sure		432 (28.1%)	573 (28.4%)	1.011	
Willing to confirm HIVST results in health facility					
Yes	108	1,132 (73.3%)	1,155 (77.4%)	2,694	0.018
No		102 (6.6%)	119 (5.9%)	224	
Not sure		310 (20.1%)	336 (16.7%)	650	

Motivators

Variables	Yes	No	N	p-value	Unadjusted OR (95% CI)	Adjusted OR (95% CI)
Sexually active			3,573			
Yes	2,418 (82.4%)	480 (75%)		0.000	1.30 (0.94 - 1.810)	1.20 (0.92 – 1.56)
No	515 (17.6%)	160 (25.0%)			Ref	
Ever tested for HIV			3,574			
Yes	2,286 (77.9%)	383 (59.9%)		0.000	1.38 (1.04 - 1.83)	2.13 (1.72 – 2.63)
No	659 (22.1%)	256 (40.1%)			Ref	
HIVST with partner			3,531			
Yes	2,229 (76.6%)	350 (56.4%)	3,531	0.000	3.99 (2.84 -5.62)	0.58 (0.49 – 0.71)
No	470 (16.2%)	115 (18.5%)			Ref	
Not sure	211 (725%)	156 (25.1%)			1.66 (1.00 - 2.75)	

Conclusion

- Vast majority of students have high levels of acceptability for HIVST and intention to test with partners
- It is also evident that HIVST as a new modality is more acceptable to the students who had ever tested for HIV in the existing HCT program.
- The results suggest that scaling up HIVST in South Africa is feasible, considering the majority of students are willing to purchase HIVST kits despite being from low socioeconomic settings and to confirm HIV positive test results at a local health facility

#Our youth are claiming their power and our programs have to be supportive and responsive

- Ngiyabonga
- Kea leboga
- Thank you